

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY **DEPARTMENT OF SOCIAL SERVICES**

744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



March 29, 2019

Bobby D. Cagle, Director Los Angeles County Department of Children & Family Services 425 Shatto Place, Room 600 Los Angeles, CA 90020

Dear Mr. Cagle:

I want to take this opportunity to thank you and your staff for the cooperation and assistance provided to the reviewer from our office during the course of the Civil Rights Compliance Review of August 27-31, 2018. Enclosed is the final report on the review.

There are some compliance issues (deficiencies) identified in the report, which will require the development of a Corrective Action Plan (CAP). Please submit your CAP within 60 days of this letter. Please address each deficiency and include steps and time lines for the completion of all corrective actions and recommendations listed in the enclosed report.

Please submit your CAP in both hardcopy and, in an effort to comply with the Americans with Disabilities Act website accessibility, we also require the CAP to be submitted electronically as a Word document via Civil Rights Unit email (crb@dss.ca.gov).

We will provide a copy of your report to any individual who makes a valid Public Records Act (PRA) request. Our reports are considered public documents under the PRA. Once we approve your CAP, it becomes a public document as well. In addition, these documents are published on our Civil Rights Unit website (http://www.cdss.ca.gov/inforesources/Civil-Rights/Compliance-Reports-and-Corrective-Action-Plans).

If you need technical assistance in the development of your CAP, please feel free to contact Tiffany Marsh at (916) 916 654-2107. You may also contact us via <u>Civil Rights Unit e-mail</u> (crb@dss.ca.gov).

Sincerely,

Original signed by Christina Teixeira

CHRISTINA TEIXEIRA, Manager Civil Rights Unit Housing, Homelessness, and Civil Rights Branch

Enclosure

c: Lynne Bowles Condon, Civil Rights Coordinator

McCoy Wade, Chief CalFresh Branch

Tami Gutierrez, Chief CalFresh Operations Bureau

Alexis Fernandez, Chief CalFresh Policy Bureau

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Joe Torres, Office of Civil Rights USDA Food and Nutrition Services Supplemental Nutrition Assistance Program (SNAP) Western Region

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Kevin Aslanian Coalition of California Welfare Rights Organizations, Inc.

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CIVIL RIGHTS COMPLIANCE REVIEW REPORT FOR

Los Angeles County **Department of Children and Family Services**

Conducted August 27-31, 2018

California Department of Social Services

Housing, Homelessness, and Civil Rights Branch

Civil Rights Unit

744 P Street, M.S. 8-16-70

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Reviewer: Tiffany Marsh

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I. INTRODUCTION

The purpose of this review by the California Department of Social Services (CDSS) Civil Rights Unit (CRU) staff is to assess the Los Angeles County Department of Children and Family Services (DCFS) with regard to its compliance with CDSS Manual of Policies and Procedures (MPP) Division 21 Regulations, and other applicable state and federal civil rights laws.

An on-site compliance review was conducted August 27, 2018 to August 31, 2018. An exit interview was held on August 31, 2018, to review the preliminary findings.

The review was conducted in the following locations:

Name of Facility	Address	Programs	Non-English languages spoken by a substantial number of clients (5% or more)
El Monte Office	4024 Durfee Avenue, El Monte	Children and Family Services	Spanish
Santa Fe Springs Office	10355 Slusher Drive, Santa Fe Springs	Children and Family Services	Spanish
Torrance Office	2325 Crenshaw Blvd., Torrance	Children and Family Services	Spanish
Compton West Office	11539 Hawthorne Blvd., Hawthorne	Children and Family Services	Spanish

II. SUMMARY OF METHODOLOGY

In preparing for this review, CDSS staff completed the following tasks:

- Reviewed the 2018-2019 Civil Rights Compliance Plan submitted by the County.
- Reviewed the civil rights discrimination complaint database for a complete listing of complaints filed against the County for the last year.
- Reviewed the previous Compliance Reviews and Corrective Action Plans submitted by the County.

Headquarters and on-site review procedures included:

- Interviews of public contact staff
- Survey of Civil Rights Coordinator
- Survey of Program Managers
- Case file reviews
- Facility inspections
- Discussion with community advocate groups. In this review the following organization(s) were contacted for feedback.

Alliance for Children's Rights 3333 Wilshire Blvd., Suite 550 Los Angeles, CA 90010

Each site/program was reviewed for compliance in the following areas:

- Dissemination of Information
- Facility Accessibility for Individuals with Disabilities
- Program Accessibility for Clients with Disabilities (physical, mental, learning, visual or hearing impairment, etc.)
- Bilingual Staffing/Services for Non-English-Speaking Clients
- Documentation of Client Case Records
- Staff Development and Training
- Discrimination Complaint Procedures

Here is a summary of the sources of information used for the review:

Interviews Conducted of Public Contact Staff

Classifications	Total	Bilingual
Children Social Workers	1	13
Receptionist/Screeners	2	2
Total	3	15

Civil Rights Coordinator and Program Manager Surveys

Number of surveys distributed: 5

Number of surveys received: 5

Reviewed Case Files

English speakers' case files reviewed: 22

Non-English or limited-English speakers' case files reviewed: 15

Languages of clients' cases: Arabic, English, and Spanish

Reasonable Accommodation cases reviewed: 7

Sections III through IX of this report contain specific Division 21 civil rights requirements and present field review findings regarding the County's compliance with each requirement. The report format first summarizes each requirement, then the actual review findings, including appropriate comparisons. This format is an effort to validate the application of policies and procedures contained in the annual plan. Required corrective actions are stated at the end of each section.

Section X evaluates the County's Call/Service Centers services provided to non-English speaking clients and clients with a disability.

Section XI reviews the County's compliance plan, and provides either approval of the plan as submitted, or lays out additional information to be submitted to gain approval.

Section XII highlights issues identified through community input and summarizes Reviewer observations.

Section XIII reserved for a declaration of overall compliance.

III. DISSEMINATION OF INFORMATION

Counties are required to disseminate information about program or program changes and about how applicants and recipients are protected by the CDSS regulations (Division 21). This dissemination should occur through outreach and information to all applicants, recipients, community organizations, and other interested persons, including non- and limited-English speakers and those with impaired hearing or vision or other disabling conditions.

A. Findings: Access to Services, Information and Outreach

Question	Comments
Does the County accommodate clients by flexing/extending their hours or allowing applications to be mailed in?	Staff schedule appointments to meet clients in their homes, at an offsite location, or at an office before or after regular business hours.
Can clients, including those with disabilities, access services when they are unable to go to the office?	Clients may access services by visiting the County website at http://www.ladcfs.org/ .

Question	Comments
Does the County ensure the awareness of available services individuals in remote areas?	Yes. Services available are made aware by County sponsored or partnered events with other Los Angeles County Departments and various local organizations are publicized by posters/flyers, newspaper articles, and the DCFS website http://www.ladcfs.org/ .

B. Findings: Signage, Posters and Pamphlets

Question	Comments
Does the County use the CDSS pamphlet "Your Rights under California Welfare Programs" (PUB 13)?	Yes.
Is the pamphlet distributed and explained to each client at intake and re-certification?	The PUB 13 is given to clients at initial face-to-face contact during an emergency response referral and is explained in the client's preferred language. The PUB 13 is available in the office lobbies.
Is the current version of PUB 13 available in Arabic, Armenian Cambodian, Chinese, English, Farsi Hmong, Japanese, Korean, Lao Mien, Portuguese, Punjabi, Russian Spanish, Tagalog, Ukrainian, and Vietnamese?	Yes. The current version of the PUB 13 dated August 2016 is available.
Were the current versions of the required posters present in the lobbies?	Yes. The "Everyone is Different, but Equal Under the Law" (PUB 86) and "And Justice for All" (Form AD 475B) were posted in the reviewed office lobbies.
Were there instructional and directional signs posted in waiting areas and other places frequented by a substantial number of non- English-speaking clients translated into appropriate languages?	Yes. There was instructional and directional signage posted in the office's threshold language.

C. Corrective Actions: None.

D. Recommendation: None.

The County is required to use the latest version of each of the referenced documents. For your information, the most recent versions are:

PUB 13 "Your Rights under California Welfare Programs" (revised 08/16)
PUB 13 Braille "Your Rights under California Welfare Programs" (revised 06/12)
PUB 86 "Everyone is Different, but Equal Under the Law" (revised 03/07)
Form AD 475B "And Justice for All" (revised 12/15)

Contact the Civil Rights Unit to receive the most recent versions, or download the PUB 13 from the <u>Civil Rights Unit website</u> (http://www.cdss.ca.gov/inforesources/Civil-Rights/Your-Rights-Under-California-Welfare-Programs).

IV. FACILITY ACCESSIBILITY FOR INDIVIDUALS WITH DISABILITIES

The Americans with Disabilities Act (ADA) requires public accommodations to provide goods and services to people with disabilities on an equal basis with the rest of the general public. The goal is to afford every individual the opportunity to benefit from the services available. Federal regulations require that architectural and communication barriers that are structural must be removed in public areas of existing facilities when their removal is readily achievable; in other words, easily accomplished and able to be carried out without much difficulty or expense.

The facility review is based on four priorities supported by the ADA regulations for planning achievable barrier removal projects. The priorities include ensuring accessible approach and entrance to the facility, access to goods and services, access to restrooms, and any other measures necessary.

Note that the references to the Americans with Disabilities Act Accessibility Guidelines (ADAAG) in the Corrective Action column refer to the federal Standards for Design. Title 24 of California Code and Regulations (T24 CCR) is also cited because there are instances when California state law is stricter than ADAAG specifications.

The County must ensure that programs and activities are readily accessible to individuals with disabilities. This includes building accessibility and availability of accessible parking as well as accessibility of public telephones and restrooms.

Regulations cited are from the Title 24, T24 CCR, and ADAAG.

A. Findings and Corrective Actions

1. Facility Location: 4024 Durfee Avenue, El Monte

Facility Element/Finding	Corrective Action
Parking: The Accessible Parking signage did not have the additional language "Minimum Fine \$250" below the International Symbol of Accessibility (ISA).	Additional language or an additional sign below the ISA signage shall state "Minimum Fine \$250". (CA T24 11B-502.6.2)
Parking: The accessible parking spaces measured at 16 feet and 9 inches in length.	Parking space minimum dimensions: 9 feet wide by 18 feet long. (CA T24 11B-502.2) (ADA 502.2)
All Gender Restrooms: The drain pipes were not securely insulated.	Water supply and drain pipes under lavatories and sinks shall be insulated or otherwise configured to protect against contact. (CA T24 11B-606.5) (ADA 606.5)
All Gender Restrooms: The mounted paper towel dispensers measured above 40 inches from finish floor.	Where towel or sanitary napkin dispensers, waste receptacles, or other accessories are provided in toilet facilities, at least one of each type shall be located on an accessible route. (CA T24 11B-603.5) All operable parts, including coin slots shall be 40 inches maximum above the finish floor. (CA T2411B-603.5)
All Gender Restroom: The changing table measured above 48 inches forward reach from finish floor.	Baby changing tables shall comply with Sections 11B-309 and 11B-902. (CA T24 11B-226.4) Baby changing tables when deployed shall not obstruct the required width of an accessible route except as allowed by CA T24 Section 11B-307.2. (CA T24 11B-226.4)
	Baby changing tables shall not be located in toilet compartments complying with CA T24 Section 11B-604.8 within a multiple accommodation toilet facility. (CA T24 11B-226.4)

Corrective Actions: Refer to Corrective Action column above (Section A, 1).

Recommendation: Address and submit a Corrective Action plan and correct all items identified in the Corrective Action column above (Section A, 1).

2. Facility Location: 10355 Slusher Drive, Santa Fe Spring

Facility Element/Finding	Corrective Action
Parking: The Accessible Parking signage did not have the additional language "Minimum Fine \$250."	Additional language or an additional sign below the ISA signage shall state "Minimum Fine \$250." (CA T24 11B-502.6.2)
Parking: The accessible parking spaces measured at 17 feet and 7 inches in length.	Parking space minimum dimensions: 9 feet wide by 18 feet long. (CA T24 11B-502.2) (ADA 502.2)
Entrance: The force to open the entrance door was excessive, exceeding the 5	The force for pushing or pulling open a door or gate other than fire doors shall be as follows:
pounds maximum.	1. Interior hinged doors and gates: 5 pounds maximum 2. Sliding or folding doors: 5 pounds maximum 3. Required fire doors: the minimum opening force allowable by the appropriate administrative authority, not to exceed 15 pounds. Exterior hinged doors: 5 pounds maximum. (CA T24 11B-404.2.9 (1 - 4)) (ADA 404.2.9 (1 - 2))
Men's and Women's Restrooms: The mounted paper towel dispensers' operable part measured above 40 inches from finish floor.	Where towel or sanitary napkin dispensers, waste receptacles, or other accessories are provided in toilet facilities, at least one of each type shall be located on an accessible route. (CA T24 11B-603.5) All operable parts, including coin slots shall be 40
11001.	inches maximum above the finish floor. (CA T2411B-603.5)

Corrective Actions: Refer to Corrective Action column above (Section A, 2).

Recommendation: Address and submit a Corrective Action plan and correct all items identified in the Corrective Action column above (Section A, 2).

3. Facility Location: 2325 Crenshaw Boulevard, Torrance

Facility Element/Finding	Corrective Action
All Gender Restrooms: The changing tables measured above 48	Baby changing tables shall comply with Sections 11B-309 and 11B-902. (CA T24 11B-226.4)
inches forward reach from finish floor.	Baby changing tables when deployed shall not obstruct the required width of an accessible route except as allowed by CA T24 Section 11B-307.2. (CA T24 11B- 226.4)
	Baby changing tables shall not be located in toilet compartments complying with CA T24 Section 11B-604.8 within a multiple accommodation toilet facility. (CA T24 11B-226.4)

Corrective Actions: Refer to Corrective Action column above (Section A, 3).

Recommendation: Address and submit a Corrective Action plan and correct all items identified in the Corrective Action column above (Section A, 3).

4. Facility Location: 11539 Hawthorne Boulevard, Hawthorne

Facility Element/Finding	Corrective Action
Parking: The parking garage vertical clearance states maximum clearance is 6 feet 8 inches. Parking: The accessible signage along the path of travel were posted on the wall below 60 inches minimum.	Parking spaces, access aisles and vehicular routes serving them shall provide a vertical clearance of 98 inches (8 feet 2 inches) minimum. (CA T24 11B-502.5) (ADA 502.5) Signs shall be 60 inches minimum above the finish floor or ground surface measure to the bottom of the sign. (CA T24 11B-502.6) (ADA 502.6)
Parking: The accessible parking did not have the "Minimum Fine \$250" signage posted below parking signage.	Additional language or an additional sign below the ISA signage shall state "Minimum Fine \$250". (CA T24 11B-502.6.2)
Parking: The access aisle did not have "No Parking" painted on the pavement.	The words "NO PARKING" shall be painted on the surface each access aisle. (CA T24 11B-502.3.3)

Facility Element/Finding	Corrective Action
Parking: There is an accessible parking space left of the garage entrance that measured at 12 feet 6 inches in length.	Parking space minimum dimensions: 9 feet wide by 18 feet long. (CA T24 11B-502.2) (ADA 502.2)
Restroom: The drain pipes were not securely insulated.	Water supply and drain pipes under lavatories and sinks shall be insulated or otherwise configured to protect against contact. (CA T24 11B-606.5) (ADA 606.5)
Restroom: The soap dispenser and paper towel dispenser measured above 40 inches from finish floor.	Where towel or sanitary napkin dispensers, waste receptacles, or other accessories are provided in toilet facilities, at least one of each type shall be located on an accessible route. (CA T24 11B-603.5)
	All operable parts, including coin slots shall be 40 inches maximum above the finish floor. (CA T2411B-603.5)
Restroom: The toilet paper dispenser in the accessible stall measured 12 inches centerline from front edge of toilet.	Toilet paper dispensers shall be 7 inches minimum and 9 inches maximum in front of the water closet measured to the centerline of the dispenser. (CA T24 11B-604.7) (ADA 604.7)

Corrective Actions: Refer to Corrective Action column above (Section A, 4).

Recommendation: Address and submit a Corrective Action plan and correct all items identified in the Corrective Action column above (Section A, 4).

V. PROVISION FOR SERVICES TO APPLICANTS AND RECIPIENTS WHO ARE NON-ENGLISH-SPEAKING OR WHO HAVE DISABILITIES

Counties are required by Division 21 to ensure that effective bilingual/interpretive services are provided to serve the needs of the non-English-speaking population and individuals with disabilities without undue delays. Counties are required to collect data on primary language and ethnic origin of applicants/recipients (identification of primary language must be done by the applicant/recipient).

Using this information, a County may determine 1) the number of public contact staff necessary to provide bilingual services, 2) the manner in which it can best provide interpreter services without bilingual staff and 3) the language needs of individual applicants/recipients. Counties must employ an appropriate number of certified bilingual public contact employees in each program and/or location that serves a substantial number of non-English-speaking persons. In offices where bilingual staff are

not required because non-English-speaking persons do not represent a substantial number, counties must provide effective bilingual services through interpreter or other means.

Counties must also provide auxiliary aids and services, including Braille material, taped text, qualified interpreters, large print materials, telecommunication devices for the deaf (TDDs), and other effective aids and services for persons with impaired hearing, speech, vision or manual skills. In addition, counties must ensure that written materials be available in individuals' primary languages if the forms and materials are provided by CDSS in that language, and that information inserted in notices of action (NOA) be in the individuals' primary language.

A. Findings from Program Manager Surveys, Staff Interviews and Case File Reviews

Question:	Comments
Does the County identify a client's language need upon first contact? How?	Yes. Client's language is identified at initial face-to-face contact and or at the time the Emergency Response Sheet is completed by phone.
Does the County use a primary language form?	Yes. Primary Language Destination Form for Parents/Legal Guardians/Children (DCFS 485).
Does the client self-declare on this form?	Yes. If the client cannot self-declare, staff will ask family members, neighbors, or any other person available that may have knowledge of the client's spoken language.
Are non-English- or limited- English- speaking clients provided bilingual services?	Yes. Clients are provided bilingual interpreter services by a bilingual staff member and/or a language interpreter service provider.
After it has been determined that the client is limited-English or non-English speaking, is there a County process for procuring an interpreter?	Yes. Staff interviewed will submit a request for interpretive services to their Supervisor.
Does the County have a contracted language line provider, a county interpreter list, or any other interpreter process?	Yes. The County has an internal list of staff interpreters available on the County's intranet webpage LA Kids, the Asian Pacific Program (Asian language interpretive services), and the Deaf Services Unit (American Sign Language interpretive services).

Question:	Comments
Is there a delay in providing interpretive services?	Based on staff interviewed, there is potential for a delay in receiving interpretive services due to scheduling needs and availability.
Are County interpreters certified?	Yes. Staff are administered a bilingual exam, which, if passed, results in verbal, reading, and written certification for proficiency in a non-English language.
Does the County have adequate interpreter services?	Yes. Although, staff interviewed would like there to be more bilingual staff available.
Does the County allow minors to be interpreters? If so, under what circumstances?	Yes. Staff interviewed stated minors may be used as interpreters at the initial emergency response as a last resort. Per County Policy 0070-501.10 "Communication Needs of Non-English Speaking Clients," the circumstance requiring the temporary use of a minor must be documented.
Does the County allow the client to provide his or her own interpreter?	Yes. The client must complete the "Interpreter Usage and Consent for Release of Information" Form (DCFS 74A).
Does the County ensure that the client- provided interpreter understands what is being interpreted for the client?	Yes.
If there is not a Release of Confidentiality Information form, how and where is the client-provided interpreter documented?	Form DCFS 74A.
Does the County use the CDSS-translated forms in the clients' primary languages?	Yes.
Does the County provide auxiliary aids and services, TDD's and other effective aids and services for persons with impaired hearing, speech, vision or manual skills, including Braille material, taped text, large print materials (besides the Pub 13)?	Yes.
Does the County identify a client with a disability (physical, mental, or learning)?	Yes. Family Background Forms (Forms I, II, III) are completed at initial assessments by Emergency Response workers. The assigned worker will follow up with client to ensure accuracy of disability identified and request supporting documentation.

Question:	Comments
Does the County assist clients with self-identifying a disability?	Yes. Staff will assist with identifying a client's disability by asking questions and gathering information.
Does the County have a policy and procedure in place for assisting clients with a disability (physical, mental, or learning)?	Yes. County Policy 0600505.12 "Identifying and Documenting a Client's Disability and Need for Special Services."
Does the County offer reasonable accommodations to clients with a disability (physical, mental, or learning)?	Yes. Staff interviewed have offered and provided clients with a reasonable accommodation.
Does the County identify and assist the client who has learning disabilities or a client who cannot read or write?	Yes. Staff interviewed have assisted clients with reading and writing.

B. Corrective Action: See the chart below.

Area of Findings	Corrective Actions
Timely Services	The County must ensure that bilingual/interpretive services are
	prompt and without undue delay. Division 21-115

C. Recommendation: Address and submit a Corrective Action Plan and correct all items identified in the chart above.

VI. DOCUMENTATION OF APPLICANT/RECIPIENT CASE RECORDS

Counties are required to ensure that case records document applicant's/recipient's ethnic origin and primary language, the method used to provide bilingual services, information that identifies an applicant/recipient as disabled, and an applicant's/recipient's request for auxiliary aids and services.

A. Findings from Case File Reviews and Staff Interviews

Children's Services

Item	How item is Documented
Ethnic Origin	Family Background forms (FB I, II, III) and Child Welfare Services (CWS)/Case Management System (CMS) Client Contact Notebook Identification Page.
Method of identifying client's primary language	Primary Language Designation Form (DCFS 485).

Item	How item is Documented
Method of documenting client's primary language	Form DCFS 485 and CWS\CMS Client Contact Notebook ID Page.
Method of providing bilingual services and documentation	Form DCFS 485 and CWS/CMS Client Contact Notebook. Inconsistent documentation identified in case samples reviewed.
Client provided own interpreter	Interpreter Usage and Consent for Release of Information Form (DCFS 74A) and CWS/CMS Client Contact Notebook.
Method to inform client of potential problem using own interpreter	Form DCFS 74A and CWS/CMS Client Contact Notebook.
Release of information to interpreter	Form DCFS 74A.
Individuals acceptance or refusal of written material offered in primary language	Form DCFS 485 and CWS/CMS Case Activity Folder.
Documentation of minor used as interpreter	Form DCFS 485 and CWS/CMS Client Contact Notebook. The use of a minor was not found or implied in case samples reviewed.
Documentation of circumstance for using minor interpreter temporarily	CWS/CMS Client Contact Notebook. There was not a documented circumstance found in the case samples reviewed to suggest temporary use of a minor.
Method of identifying client's disability	Forms FB I, II, III.
Method of documenting client's disability (physical, mental, or learning)	Forms FB I, II, III and CWS/CMS Case Activity Recording Folder, Health and Client Contact Notebook, Education Passport, and Case Alert Section. There was appropriate documentation found in some case samples reviewed of clients (parent or child) with a disability.
Method of offering a reasonable accommodation to the client with a disability	CWS/CMS Client Contact Notebook. Staff will ask client at initial contact if there is a need for a reasonable accommodation.

Item	How item is Documented
Method of documenting client's reasonable accommodation	CWS/CMS Case Activity Recording Folder and Health and Client Contact Notebook. There was appropriate documentation found in some case samples reviewed of services provided to clients (parent, caregiver, or child).

B. Corrective Action: Refer to the chart below.

Element	Corrective Action
Documentation that bilingual services were provided	Document the method used to provide bilingual services, for example, assigned worker is bilingual, another bilingual employee acted as interpreter, volunteer interpreter was used, or client provided interpreter. Div. 21-116.22
General	The County must ensure that proper and consistent documentation is kept in the file that identifies all the required elements to ensure compliance. Division 21-116

C. Recommendation: Address and submit a Corrective Action Plan and correct all items identified in the chart above.

VII. STAFF DEVELOPMENT AND TRAINING

Counties are required to provide civil rights, cultural awareness, Section 504 of the Rehabilitation Act of 1973 (Section 504), and ADA training for all public contact employees, including familiarization with the discrimination complaint process and all other requirements of Division 21. The training should be included in orientation, as well as the continuing training programs.

A. Findings

Interview Questions	Comments
Are employees trained in the requirement of Section 504 and ADA?	Yes. Section 504 and ADA are included in the web-based training module "Civil Rights Regulations Review." However, not all staff interviewed could recall ever receiving the training.

Interview Questions	Comments
Do employees receive continued Division 21 Training?	The "Civil Rights Regulations Review" training is mandatory for newly hired support staff, included in the Core Academy Training. The "Civil Rights Regulations Review" web-based training module is available for continual training to staff who have public contact.
Do employees understand the County policy regarding a client's rights and procedure to follow when receiving a discrimination complaint?	Yes.
Does the County provide employees Cultural Awareness Training?	Yes. The County offers a web-based training "Civil Rights Information for Support Staff" and "Civil Rights and Cultural Competencies What Every Human Service Aid (HSA) Should Know." This training is required for newly hired staff and HSAs. However, not all staff interviewed could recall or had knowledge of the trainings.
Do the CSW's have an understanding of Multi-Ethnic Placement Act (MEPA)?	Yes. The application of MEPA is included in the "Civil Rights Regulations Review" training.
Do the employees seem knowledgeable about the predominant cultural groups receiving services in their area?	Yes.
Does the County provide training on how to identify clients with disabilities (physical, mental and learning)?	Not all staff interviewed are aware of a training on how to identify clients with disabilities.
Do employees receive training on reasonable accommodation for clients with disabilities?	Training on reasonable accommodation is providing in the County's Health and Safety Training. However, not all staff interviewed have received training on reasonable accommodation for clients.
Do the employees understand the County policy regarding a client's right to a reasonable accommodation?	Not all staff interviewed are aware of or know for sure there is a County reasonable accommodation policy; however, would provide reasonable accommodation upon request.

B. Corrective Actions: Refer to the chart below.

Training Area	Corrective Action
Division 21, Civil Rights Training	The County shall ensure that employees receive Division 21 civil rights training at the time of orientation, as well as ongoing training to ensure that public contact staff has knowledge of Division 21, including familiarization with the discrimination complaint process. Div. 21-117.1
Cultural Awareness and Disability Training	The County shall ensure that all public contact employees receive cultural awareness training to ensure that public contact staff has an understanding of and sensitivity to the various cultural groups including individuals with disabilities to ensure equal delivery of services in the County's population. Div. 21-117.2

C. Recommendation: Address and submit a Corrective Action Plan and correct all items identified in the chart above.

VIII. DISCRIMINATION COMPLAINT PROCEDURES

Counties are required to maintain a process for addressing all complaints of discrimination. They must track complaints of discrimination through the use of a control log in which all relevant information is kept, including when the complaint was received, the name of the complainant, identifying numbers and programs, basis of discrimination, and resolution. It is usually the Civil Rights Coordinator's responsibility to maintain this log.

A. Findings from Staff Interviews, Civil Rights Coordinator, and Program Manager Surveys

Interview and Review Areas:	Findings
Can the employees easily identify the difference between a program, discrimination, and a personnel complaint?	No, not all staff interviewed where able to distinguish the difference between the three types of complaints that can be filed by a client.
Do the employees know who the Civil Rights Coordinator is?	No, not all staff interviewed where able to identify Lynne Bowles Condon as the Civil Rights Coordinator.
Do the employees know the location of the Civil Rights poster "Everyone is Equal (PUB 86)" with information as to how and where the clients can file a discrimination complaint?	No, not all staff interviewed know the location of the PUB 86 that provides information on how and with who to file a discrimination complaint.

Interview and Review Areas:	Findings
When reviewing the complaint log with the Civil Rights Coordinator, was it complete and up to date?	Yes.

B. Corrective Actions: Refer to the chart below.

Element	Corrective Action
Discrimination Process	The County shall ensure staff have knowledge of the discrimination complaint process and are able to
	differentiate it from other complaint processes. Division 21-117 and 21-203
Civil Rights Coordinator	The County shall ensure that staff is knowledgeable regarding contact information of the civil rights coordinator, at minimum, where the information can be located. Division 21-117 and 21-107.21

C. Recommendation: Inform and train all public contact staff persons about the County's complaint processes, including how to identify the different types of complaints. Ensure all staff persons are able to identify the Civil Rights Coordinator and have sufficient knowledge about were clients can locate the identifying information.

IX. VENDOR CONTRACTS

Counties are required to ensure contracted services with contractors, vendors, consultants, and other providers of service, who receive state or federal assistance, include the assurance of compliance agreement.

A. Contracts Review

Number of Contracts Reviewed	15
Number of Contracts with an Assurance of Compliance Agreement	15

B. Corrective Action: None.

X. CALL CENTER EVALUATION

DCFS does not operate a Call Center. Although there are currently no statutory requirements for call centers, DCFS maintains avenues in which to meet the demands of applicants, recipients, and clients.

XI. COMMUNITY INPUT

As a part of this review, and as noted in Section II, feedback was sought from community and advocate groups. The following summarizes their observations and identifies issues that the County management team can address to improve their operations from a civil rights perspective.

A. Major Observations

Education

- Failure to identify mental health and special education needs of foster youth.
- Failure to provide services and support, to caregivers of youth with disabilities to stabilize home placement and avoid unnecessary school changes.
- Failure to appropriately consider relevant factors in school of origin decision, including for students with disabilities (advocates identified situations in which foster youth with an individual education program (IEP) change schools and, instead of tailoring the services to the youth's needs, the IEP is changed to reflect the services available at the new school).

Foster Care Benefits

- Failure to properly assess foster youth for the appropriate rate based on special needs at the time of placement.
 - Includes the failure to notify non-relative probate legal guardians of their entitlement to state foster care funding and specialized care rate for youth with disabilities and a failure to assess youth in probate legal quardianships with non-relatives for a specialized care rate.
- Failure to consistently provide the infant supplement to all eligible pregnant/parenting youth.
- Failure to issue Notices of Action in the caregiver's native language.

Transition-Age Youth

- Housing
 - Existing transitional housing placements are not equipped to serve nonminor dependents (NMDs) with mental health needs or pregnant NMDs; youth are discharged from placement due to mental health needs or pregnancy.
 - There are a dearth of transitional housing placements and emergency placements for NMDs with mental health needs.
 - Transitional housing providers do not offer reasonable accommodations to NMDs with mental health needs or pregnant NMDs.
 - Includes the intake process advocates are concerned that youth with mental health needs are screened out due to failure to provide reasonable accommodations during the intake process.
 - New Transitional Housing Placement Plus Foster Care Contract
 Statement of Work states providers should prioritize housing for NMDs

who are "managing their mental health concerns" – it is unclear what this means and may result in discrimination against youth with higher level mental health needs.

 Statement of work also states that contractors must provide units to accommodate NMDs who have "managed mental health concerns" – again, it is unclear what this means and may result in discrimination.

Access to Services

- Access to Services
 - County staff (e.g., Children Social Workers, Individual Living Program (ILP) coordinators) do not offer reasonable accommodations to youth with mental health needs to ensure equal access to services (e.g., ILP reimbursement)

XII. CIVIL RIGHTS COMPLIANCE PLAN REVIEW AND APPROVAL

The Los Angeles Department of Children and Family Services Civil Rights Compliance Plan for the period July 1, 2018 through June 30, 2019, was received June 2018. It is approved as submitted.

XIII. CONCLUSION

The CDSS Reviewer found the County staff warm, welcoming, informative and very supportive. Particular thanks to Zareh Zaragaryan, Civil Rights Manager, for organizing the details of the review, and to staff, who assisted in each of the facility reviews. In each District Office, staff were very helpful with the facility reviews, case reviews, and computer assistance.

The CDSS found the County in substantial satisfactory compliance with CDSS Division 21 Regulations, and other applicable state and federal laws. County staff continues to reflect a commitment similar to that expressed by management with respect to ensuring access, assistance, and compliance.

The County must remedy the deficiencies identified in this report by taking corrective actions. A CAP must be received by CDSS within 60 days of the date of the cover letter to this report; and the plan must include a schedule of all actions that will be taken to correct the deficiencies, and an indication of who will be responsible for implementing the corrective action.

It is CDSS' intent that this report be used to create a positive interaction between the County and CDSS to identify and correct compliance violations and to provide the County with an opportunity to implement corrective action to achieve compliance with Division 21 regulations. Civil Rights Unit staff is available to provide technical assistance as requested.